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14. ABSTRACT Many troops return from deployment with mental health problems related to their experiences. One such problem is posttraumatic stress disorder (PTSD), which involves symptoms such as persistent unwanted memories of traumatic events, avoidance of reminders of the events, excessive watchfulness, jumpiness and irritability. Current therapies for PTSD focus chiefly on fear related to life-threat and were developed chiefly on civilians. We developed and piloted tested an early psychological treatment for PTSD designed specifically for service members who suffer not only life-threat, but traumatic loss and inner conflicts from morally injurious experiences. AD is an eight-session treatment that helps Marines to identify unhelpful beliefs about a traumatic event and find ways to move forward. Preliminary data suggests that AD is acceptable to Marines, safe and feasible to implement, and that it reduces PTSD and depression. The primary objective of this randomized controlled non-inferiority trial is to determine whether Adaptive Disclosure (AD), a new combat-specific psychotherapy for PTSD, is comparable in efficacy to Cognitive Processing Therapy, cognitive only version (CPT-C) in terms of its impact on deployment-related psychological problems (specifically PTSD and depression) and functioning. As secondary aims, we have specified some comparisons in which we believe that AD will be superior to CPT-C (degree of change in posttraumatic grief, moral injury, resilience, and posttraumatic growth, as well as degree of treatment acceptability) and we propose to evaluate a posited mechanism of change (trauma-related cognition). There are no up-to-date findings as data collection has not yet begun.					
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INTRODUCTION

More than 2 million U.S. troops have served in the wars in Afghanistan and Iraq. Findings from epidemiologic studies of infantry troops in the early stages of the wars suggest that 10-18% of combat troops experience deployment-related psychological health problems, such as posttraumatic stress disorder (PTSD; e.g., Hoge et al., 2004; see Litz & Schlenger, 2009). Once service members and new Veterans develop sustained mental health problems related to combat and operational stress, many are at risk to remain chronic across the lifespan (e.g., Kessler et al., 1995; Kulka et al., 1990; Prigerson et al., 2001). Thus, primary and secondary prevention of PTSD is a critical challenge for the military and the VA (e.g., Litz & Bryant, 2009). We have developed a novel intervention, *Adaptive Disclosure (AD)*, to address these needs. AD is a hybrid and extension of evidence-informed cognitive-behavioral therapy strategies packaged and sequenced to target the three high base-rate combat and operational traumas, namely, life-threat trauma, loss (principally traumatic loss), and experiences that produce inner moral conflict (Steenkamp et al., 2011). AD employs a Prolonged Exposure (PE) strategy (imaginal emotional processing of an event) and cognitive-therapy-based techniques used in Cognitive Processing Therapy (CPT), but also includes gestalt-therapy techniques designed to target loss and moral injury. In our open pilot trial, we demonstrated treatment acceptability among Marines and large reductions in PTSD and comorbid symptoms. The primary objective of the current randomized control non-inferiority trial is to determine whether AD is as least as effective as CPT, cognitive only version (CPT-C), in terms of its impact on deployment-related psychological health problems (specifically PTSD and depression) and functioning.

BODY

Statement of Work (SOW)

1. **Regulatory Review and IRB Approval (delayed by 18 months):**
 - (1) **Prepare and submit human subjects protection application to UCSD IRB, VA Research and Development (R&D) Committee, IRB for Camp Pendleton, Boston IRB/R&D and Army ORP.** IRBs have been approved by UCSD IRB, VA Boston IRB/R&D, and Camp Pendleton IRB. HRPO approval was obtained in June 2012.
 - (2) **Establish weekly meetings for principal investigators for study planning and initiation.** Biweekly meetings and conference calls with principal investigators have been established; they are currently occurring on an as-need basis but will be attended weekly once recruitment begins.
2. **Patient Recruitment, Enrollment, Intervention :** 1) **Identify and recruit potential participants;** (2) **monitor enrollment progress at clinics;** (3) **provide ongoing supervision for therapists;** (4) **collect data from study participants [pre-treatment through 32 weeks];** (5) **conduct audio recording for on-going adherence and provide prompt feedback to assessors and therapists;** (6) **collect and report adverse events and serious adverse events;** (7) **transport deidentified data to Boston for entry and secure storage;** (8) **ongoing data quality monitoring.** Due to the much longer than expected process of obtaining legal and regulatory approval through the Naval Medical Center San Diego, enrollment did not begin this year as planned.
3. **Hire and Train Study Personnel:** All Boston study personnel are hired and trained and ready to begin data collection. All preparatory tasks have been finalized.

Site Location Information

Site 1: San Diego [Veterans Medical Research Foundation (VMRF)]
 9500 Gilman Dr. (MC 0855)
 La Jolla, CA 92093-0855
 PI: Ariel J. Lang, Ph.D., M.P.H.
 Human use at Camp Pendleton.

Site 2: Boston [Boston VA Research Institute (BVARI)]
 150 South Huntington Avenue,
 Room 11B-60
 Boston, MA 02130
 PI: Brett Litz, Ph.D.
 No human or animal use at this site.

Site 3: UCSD
 9500 Gilman Dr.
 La Jolla, CA 92093
 PI: William Nash, M.D.
 No human or animal use at this site.

Gantt Chart for SOW

	Year 1	Year 2	Year 3	Year 4
Preparatory Phase: Set-up, Regulatory Review and Approvals				
IRB and VA R&D Committee approvals	VMRF, Boston			
Army ORP approval	VMRF			
Hire and train staff	VMRF, Boston, UCSD			
Develop database	Boston			
Recruitment, Enrollment and Intervention				
Recruit and enroll participants		VMRF, UCSD		
Deliver AD and CPT-C		VMRF		
Data collection		VMRF, Boston		
Supervise assessors and therapists		VMRF, Boston, UCSD		
Data quality monitoring		VMRF, Boston		
Data Collection and Close-out				
Complete data collection			VMRF, Boston	
Complete database			Boston	
Analysis, Writing & Dissemination				
Complete data analysis				Boston
Prepare reports, manuscripts, presentations				VMRF, Boston, UCSD

KEY RESEARCH ACCOMPLISHMENTS

Recruitment has not yet begun. No data have been collected in the past year.

REPORTABLE OUTCOMES

None at this time.

CONCLUSION

Recruitment has not yet begun. No data have been collected in the past year.

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